

**STATE OF NEW MEXICO
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES
OIL CONSERVATION DIVISION**

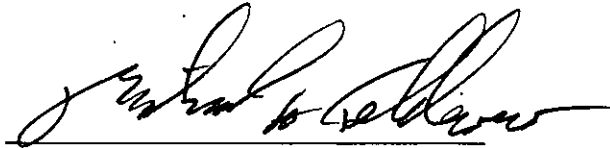
**APPLICATION OF COG OPERATING LLC
FOR A NON-STANDARD SPACING AND
PRORATION UNIT AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.**

CASE NO. 15281

AFFIDAVIT

STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

Michael H. Feldewert, attorney in fact and authorized representative of COG Operating LLC the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application has been provided under the notice letters and proof of receipts attached hereto.

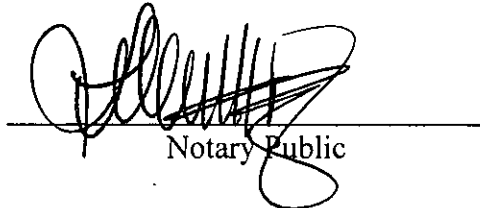


Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 1st day of April 2015 by Michael H. Feldewert.



OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO
My commission expires 01/14/19



Notary Public

**BEFORE THE OIL CONSERVATION
DIVISION**
Santa Fe, New Mexico
Exhibit No. 7
Submitted by: COG Operating LLC
Hearing Date: April 2, 2015

**COG OPERATING LLC
PILUM 15 FEE #1H WELL**

POOLED PARTIES:

Pyle Family Trust, James R. Pyle
and Jean A. Pyle, Trustees
480 Bray Central Drive
Allen, TX 75013

Charles M. Morgan and
Monica Ann Morgan
4032 U.S. Highway 82
Mayhill, NM 88339

E.A. & A.L. Everest Living Trust,
Stephen A. Everest, Sr., Successor
Trustee
1019 East Waco
Kermit, TX 79745

Sharbro Energy LLC
PO Box 840
Artesia, NM 88211

Yates Industries LLC
PO Box 840
Artesia, NM 88211

Stephen A. Everest, Jr.
1019 East Waco
Kermit, TX 79745

Hughes and Hughes, LLC
6957 NW Expressway #112
Oklahoma City, OK 73132

OFFSETS:

Enervest Energy Fund XI-WI, L.P.
1001 Fannin, Suite 800
Houston, TX 77002

Explorers Petroleum Corp.
PO Box 1933
Roswell, NM 88202

Harvey E. Yates Company
PO Box 1933
Roswell, NM 88202

John A. Yates
105 South 4th Street
Artesia, NM 88210

Lime Rock Resources II-A, L.P.
Heritage Plaza, Ste. 4600
1111 Bagby Street
Houston, TX 77002

Prime Energy Corporation
2900 Wilcrest Drive, Suite 475
Houston, TX 77042

Sacramento Partners
105 South 4th Street
Artesia, NM 88210

Sharbro Oil Ltd.
PO Box 840
Artesia, NM 88210

Spiral, Inc.
PO Box 1933
Roswell, NM 88202

Trust Q'u/w/o Peggy A. Yates
John A. Yates as Trustee
105 South 4th Street
Artesia, NM 88210

Yates Energy Corporation
PO Box 2323
Roswell, NM 88202

Yates Petroleum Corporation
105 South 4th Street
Artesia, NM 88210

HOLLAND & HART^{LLP}



Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JLKessler@hollandhart.com

March 13, 2015

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: PARTIES SUBJECT TO POOLING PROCEEDINGS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico
Pilum 15 Fee No. 1H Well**

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on April 2, 2015. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Stuart Dirks, at (432) 685-4354 or sdirks@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone [505] 988-4421 **Fax** [505] 983-6043 **www.hollandhart.com**

110 North Guadalupe Suite 1 Santa Fe, New Mexico 87501 **Mailing Address** P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington, D.C. ☐

HOLLAND & HART^{LLP}



Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JLKessler@hollandhart.com

March 13, 2015

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSET PARTIES

**RE: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico
Pilum 15 Fee No. 1H Well**

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application*, but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on April 2, 2015. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-Hearing Statement with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Stuart Dirks, at (432) 685-4354 or sdirks@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone (505) 988-4421 **Fax** (505) 983-6043 **www.hollandhart.com**

110 North Guadalupe Suite 1 Santa Fe, New Mexico 87501 **Mailing Address** P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington, D.C. ☐

7006 2760 0001 6382 8161

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **OFFIC**
MHF/COG
PILUM 15 1H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$

Sent To Pyle Family Trust, James R. Pyle
 and Jean A. Pyle, Trustees
 Street, Apt. or PO Box 480 Bray Central Drive
 City, State, Allen, TX 75013

PS Form 3811, July 2013

Postmark Here
 MAR 13 2015
 DE VARGAS POST OFFICE 88339 NM

7006 2760 0001 6382 8222

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **OFFIC**
MHF/COG
PILUM 15 1H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$

Sent To Charles M. Morgan and
 Monica Ann Morgan
 Street, Apt. or PO Box 4032 U.S. Highway 82
 City, State Mayhill, NM 88339

PS Form 3811, July 2013

Postmark Here
 MAR 13 2015
 DE VARGAS POST OFFICE 88339 NM

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Pyle Family Trust, James R. Pyle
 and Jean A. Pyle, Trustees
 480 Bray Central Drive
 Allen, TX 75013

2. Article Number
 (Transfer from service) 7006 2760 0001 6382 8161

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ X Jean A. Pyle ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☒ Yes
 If YES, enter delivery address below: ☐ No
Agst 11/21

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 8215

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No International Mail)
 For delivery information visit **OFFIC** **MHF/COG**
PILUM 15 1H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$ 1069

Sent To
 Street, Apt. 1 or PO Box N
 City, State, Z
 E.A. & A.L. Everest Living Trust,
 Stephen A. Everest, Sr., Successor
 Trustee
 1019 East Waco
 Kermit, TX 79745

PS Form 3811, February 2004

7006 2760 0001 6382 8208

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No International Mail)
 For delivery information visit **OFFIC** **MHF/COG**
PILUM 15 1H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$ 1069

Sent To
 Street, Apt. 1 or PO Box N
 City, State, Z
 Sharbro Energy LLC
 PO Box 840
 Artesia, NM 88211

PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 E.A. & A.L. Everest Living Trust,
 Stephen A. Everest, Sr., Successor
 Trustee
 1019 East Waco
 Kermit, TX 79745

2. Article Number
 (Transfer from service label) 7006 2760 0001 6382 8215

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee
 B. Received by (Printed Name) [Signature] C. Date of Delivery MAR 19 2005
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:
 3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Sharbro Energy LLC
 PO Box 840
 Artesia, NM 88211

2. Article Number
 (Transfer from service label) 7006 2760 0001 6382 8208

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee
 B. Received by (Printed Name) [Signature] C. Date of Delivery 3-16-05
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:
 3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery
 4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6382 8192

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **OFFICIAL MAIL SERVICE**
MHF/COG
PILUM 15 1H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage 1338

Sent To
 Street, Apt. or PO Box
 City, State, ZIP+4®
 Yates Industries LLC
 PO Box 840
 Artesia, NM 88211

PS Form 3811, July 2013

7006 2760 0001 6382 8185

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **OFFICIAL MAIL SERVICE**
MHF/COG
PILUM 15 1H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage 1338

Sent To
 Street, Apt. or PO Box
 City, State, ZIP+4®
 Stephen A. Everest, Jr.
 1019 East Waco
 Kermit, TX 79745

PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Yates Industries LLC
 PO Box 840
 Artesia, NM 88211

2. Article Number (Transfer from service label) 7006 2760 0001 6382 8192

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee
 B. Received by (Printed Name) C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:
 3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery
 4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Stephen A. Everest, Jr.
 1019 East Waco
 Kermit, TX 79745

2. Article Number (Transfer from service label) 7006 2760 0001 6382 8185

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee
 B. Received by (Printed Name) C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:
 3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery
 4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 8178

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**

(Domestic Mail Only; No Insurance)

For delivery information visit our website

**MHF/COG
PILUM 15 1H**

OFFICIAL

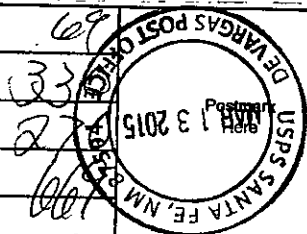
Postage \$ 6.80

Certified Fee 3.30

Return Receipt Fee (Endorsement Required) 2.70

Restricted Delivery Fee (Endorsement Required) 0.00

Total Postage & Fees \$ 12.80



Sent To

Street,
or POE

City, St

PS Form

Hughes and Hughes, LLC
6957 NW Expressway #112
Oklahoma City, OK 73132

Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hughes and Hughes, LLC
6957 NW Expressway #112
Oklahoma City, OK 73132

 2. Article Number 7006 2760 0001 6382 8178
(Transfer from service label)
COMPLETE THIS SECTION ON DELIVERY

A. Signature

X L. Hodges☐ Agent☐ Addressee

B. Received by (Printed Name)

L. Hodges

C. Date of Delivery

3-16-15D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No
 MAR
18
2015

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811, July 2013

Domestic Return Receipt

7006 2760 0001 6382 7966

U.S. Postal Service_{TM}
CERTIFIED MAIL_{TM} RECEIPT
 (Domestic Mail Only, No Insurance Coverage Provided)

For delivery information, visit **MHF/COG**
OFFICIAL **PILUM 15 1H**

Postage \$ 6.90

Certified Fee 33.00

Return Receipt Fee (Endorsement Required) 22.00

Restricted Delivery Fee (Endorsement Required) 66.00

Total Postage & Fees \$ 127.90

Sent To: **Enervest Energy Fund XI-WI, L.P.**
 Street or PO: **1001 Fannin, Suite 800**
 City, State, ZIP: **Houston, TX 77002**

PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Enervest Energy Fund XI-WI, L.P.
1001 Fannin, Suite 800
Houston, TX 77002

2. Article Number (Transfer from service label) **7006 2760 0001 6382 7966**

COMPLETE THIS SECTION ON DELIVERY

A. Signature **[Signature]** ☐ Agent ☐ Addressee

B. Received by (Printed Name) **[Name]** C. Date of Delivery **3-12-15**

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail[®] ☐ Priority Mail Express[™]
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6382 1957

U.S. Postal Service_{TM}
CERTIFIED MAIL_{TM} RECEIPT
 (Domestic Mail Only, No Insurance Coverage Provided)

For delivery information, visit **MHF/COG**
OFFICIAL **PILUM 15 1H**

Postage \$ 6.90

Certified Fee 33.00

Return Receipt Fee (Endorsement Required) 22.00

Restricted Delivery Fee (Endorsement Required) 66.00

Total \$ 127.90

Sent To: **Explorers Petroleum Corp.**
 Street or PO: **PO Box 1933**
 City, State, ZIP: **Roswell, NM 88202**

PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Explorers Petroleum Corp.
PO Box 1933
Roswell, NM 88202

2. Article Number (Transfer from service label) **7006 2760 0001 6382 1957**

COMPLETE THIS SECTION ON DELIVERY

A. Signature **[Signature]** ☐ Agent ☐ Addressee

B. Received by (Printed Name) **[Name]** C. Date of Delivery **3-17-15**

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail[®] ☐ Priority Mail Express[™]
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6381 9428

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance)

For delivery information visit **USPS.com**

OFFICE

MHF/COG
 PILUM 15 1H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total \$ 1338

Sent To: Harvey E. Yates Company
 PO Box 1933
 Roswell, NM 88202

PS Form 3800, August 12, 2000

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits:

1. Article Addressed to:
 Harvey E. Yates Company
 PO Box 1933
 Roswell, NM 88202

2. Article Number 7006 2760 0001 6381 9428
 (Transfer from service label)

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* ☐ Agent ☐ Addressee
 B. Received by (Printed Name): *[Name]* C. Date of Delivery: *3/17/15*
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:
 3. Service Type: ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered® ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery
 4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 1964

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance)

For delivery information visit **USPS.com**

OFFICE

MHF/COG
 PILUM 15 1H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 220
 Restricted Delivery Fee (Endorsement Required) 669
 Total Post \$ 1288

Sent To: John A. Yates
 105 South 4th Street
 Artesia, NM 88210

PS Form 3800, August 12, 2000

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits:

1. Article Addressed to:
 John A. Yates
 105 South 4th Street
 Artesia, NM 88210

2. Article Number 7006 2760 0001 6382 1964
 (Transfer from service label)

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* ☐ Agent ☐ Addressee
 B. Received by (Printed Name): *[Name]* C. Date of Delivery:
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:
 3. Service Type: ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered® ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery
 4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 1803

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Ins)	
For delivery information visit OFFICIAL	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	
Lime Rock Resources II-A, L.P. Heritage Plaza, Ste. 4600 1111 Bagby Street Houston, TX 77002	
Sent To Street, A or PO Box City, State	
PS Form 3811, July 2013	

7006 2760 0001 6382 7904

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Ins)	
For delivery information visit OFFICIAL	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	
Prime Energy Corporation 2900 Wilcrest Drive, Suite 475 Houston, TX 77042	
Sent To Street, A or PO Box City, State	
PS Form 3811, July 2013	

SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.		COMPLETE THIS SECTION ON DELIVERY A. Signature X <i>Kelly SAGGINS</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) Kelly SAGGINS C. Date of Delivery 3-18-15 D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to: Lime Rock Resources II-A, L.P. Heritage Plaza, Ste. 4600 1111 Bagby Street Houston, TX 77002		3. Service Type ☒ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery 4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label)		7006 2760 0001 6382 1803	
PS Form 3811, July 2013		Domestic Return Receipt	

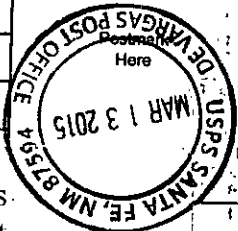
7006 2760 0001 6382 7898

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **MHF/COG**
OFFICE PILUM 15 1H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total	

Sent To Sacramento Partners
 105 South 4th Street
 Artesia, NM 88210

PS Form 3800, August 2006 See Reverse for Instructions



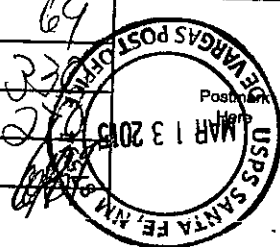
7006 2760 0001 6382 7881

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **MHF/COG**
OFFICE PILUM 15 1H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total	

Sent To Sharbro Oil Ltd.
 PO Box 840
 Artesia, NM 88210

PS Form 3800, August 2006 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Sacramento Partners
 105 South 4th Street
 Artesia, NM 88210

2. Article Number (Transfer from service label): 7006 2760 0001 6382 7898

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name): *[Signature]* C. Date of Delivery: *[Signature]*

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type:
☒ Certified Mail[®] ☐ Priority Mail Express[™]
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Sharbro Oil Ltd.
 PO Box 840
 Artesia, NM 88210

2. Article Number (Transfer from service label): 7006 2760 0001 6382 7881

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* ☐ Agent ☐ Addressee

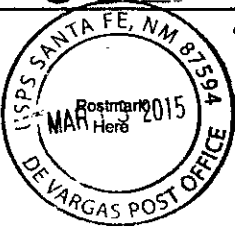
B. Received by (Printed Name): *[Signature]* C. Date of Delivery: *[Signature]*

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

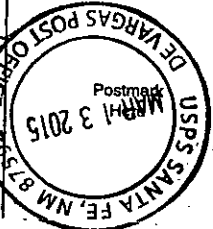
3. Service Type:
☒ Certified Mail[®] ☐ Priority Mail Express[™]
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

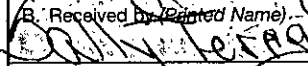
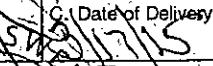
4. Restricted Delivery? (Extra Fee) ☐ Yes

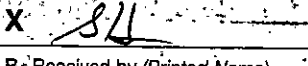
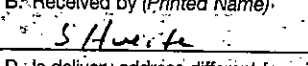
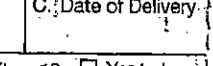
7006 2760 0001 6382 7874

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Signature Required)	
For delivery information visit	MHF/COG PILUM 15 1H
OFFICE	
Postage \$	68
Certified Fee	230
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	669
	
Sent To	Spiral, Inc.
Street, Apt. or PO Box	PO Box 1933
City, State	Roswell, NM 88202
PS Form	

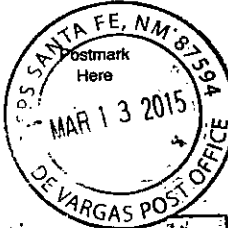
7006 2760 0001 6382 7867

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Signature Required)	
For delivery information visit	MHF/COG PILUM 15 1H
OFFICE	
Postage \$	68
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	669
	
Sent To	Trust Q u/w/o Peggy A. Yates
Street, Apt. or P.O. Box	John A. Yates as Trustee
City, State	105 South 4th Street Artesia, NM 88210
PS Form	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature  ☐ Agent ☐ Addressee B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to:		3. Service Type:	
Spiral, Inc. PO Box 1933 Roswell, NM 88202		☒ Certified Mail® ☐ Priority Mail Express™ ☐ Registered® ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
2. Article Number (Transfer from service label)		4. Restricted Delivery? (Extra Fee) ☐ Yes	
7006 2760 0001 6382 7874			
PS Form 3811, July 2013		Domestic Return Receipt	

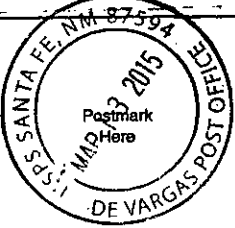
SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature  ☐ Agent ☐ Addressee B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to:		3. Service Type:	
Trust Q u/w/o Peggy A. Yates John A. Yates as Trustee 105 South 4th Street Artesia, NM 88210		☒ Certified Mail® ☐ Priority Mail Express™ ☐ Registered® ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
2. Article Number (Transfer from service label)		4. Restricted Delivery? (Extra Fee) ☐ Yes	
7006 2760 0001 6382 7867			
PS Form 3811, July 2013		Domestic Return Receipt	

7006 2760 0001 6382 7850

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No International Delivery Permitted)	
For delivery information visit	MHF/COG
OFFICIAL	PILUM 15 1H
Postage \$	89
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees \$	
	
Sent To	Yates Energy Corporation
Street, Apt. or PO Box	PO Box 2323
City, State	Roswell, NM 88202
PS Form	3811

COMPLETE THIS SECTION ON DELIVERY	
A. Signature	☐ Agent ☒ Addressee
B. Received by (Printed Name)	C. Date of Delivery
Ted Hamilton	3/18/15
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
	
3. Service Type	
☒ Certified Mail®	☒ Priority Mail Express™
☐ Registered	☒ Return Receipt for Merchandise
☐ Insured Mail	☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number	
(Transfer from service label) 7006 2760 0001 6382 7850	
PS Form 3811, July 2013 Domestic Return Receipt	

7006 2760 0001 6382 7843

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No International Delivery Permitted)	
For delivery information visit	MHF/COG
OFFICIAL	PILUM 15 1H
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees \$	
	
Sent To	Yates Petroleum Corporation
Street, Apt. or PO Box	105 South 4th Street
City, State	Artesia, NM 88210
PS Form	3811

COMPLETE THIS SECTION ON DELIVERY	
A. Signature	☐ Agent ☒ Addressee
B. Received by (Printed Name)	C. Date of Delivery
S. Huerfano	
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
3. Service Type	
☒ Certified Mail®	☐ Priority Mail Express™
☐ Registered	☒ Return Receipt for Merchandise
☐ Insured Mail	☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number	
(Transfer from service label) 7006 2760 0001 6382 7843	
PS Form 3811, July 2013 Domestic Return Receipt	